## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE rEE
Commissioner for Patents
P.O. Box 1450
Alexandra (2017)

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

appropriate. All further on indicated unless corrected maintenance fee notificat	d below or directed oth	ig the Patent, advance or iterwise in Block 1, by (a		pondence address; a	nd/or (b) mulcating a sepa	ifate TEE ADDRESS 101
CURRENT CORRESPONDE	NCE ADDRESS (Note: Use Ble	ock 1 for any change of address)	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
23646	7590 12/17	/2008		Cout	Seate of Mailing or Trans	mission
BARNES & TH 750-17TH STRE SUITE 900	HORNBURG LLI EET NW	)	I her State addr trans	reby certify that this es Postal Service with essed to the Mail smitted to the USPT	Fee(s) Transmittal is being h sufficient postage for firs Stop ISSUE FEE address O (571) 273-2885, on the d	g deposited with the United st class mail in an envelope above, or being facsimile late indicated below.
WASHINGTON	, DC 20006-4675					(Depositor's name)
						(Signature)
						(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/550,012 12/27/2006		Andreas Tazreiter		566/44299	5759	
TITLE OF INVENTION	: RETRACTABLE STE	Р				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	03/17/2009
EXAM	INER	ART UNIT	CLASS-SUBCLASS	]		
SMITH, JASON C		3617	105-447000			
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> </ol>			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  1 BARNES & THORNBURG LLP			
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.						
3. ASSIGNEE NAME A	ND RESIDENCE DAT.	A TO BE PRINTED ON	THE PATENT (print or ty	pe)	. t. t.d stff. ad balance than	de sument has been filed for
PLEASE NOTE: Uni	less an assignee is ident th in 37 CFR 3.11. Com	tified below, no assignee pletion of this form is NO	of a substitute for fifting an	assignment.		document has been filed for
(A) NAME OF ASSI	GNEE		(B) RESIDENCE: (CITY	Y and STATE OR Co	OUNTRY)	
KNORR_BREMSE AG Munchen, Germany						
Please check the appropr	riate assignee category o	r categories (will not be p	rinted on the patent):	Individual 🗓 Co	rporation or other private gi	roup entity Government
4a. The following fee(s) are submitted:  4 Issue Fee			b. Payment of Fcc(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.			
Nublication Fee (No small entity discount permitted)			Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 02-1010 (enclose an extra copy of this form).			
Advance Order -	# of Copies		overpayment, to Depo	y authorized to chargosit Account Numbe	r 02-1010 (enclose	an extra copy of this form).
5. Change in Entity Sta	itus (from status indicate as SMALL ENTITY stat	ed above)	h Applicant is no lor	nger claiming SMAI	L ENTITY status. See 37 (	CFR 1.27(g)(2).
NOTE: The Issue Fee ar	nd Publication Fee (if red	nuired) will not be accepted				the assignee or other party in
interest as shown by the			k Office.		1,1,9	
Authorized Signature	. / White			Date	14/01	
	ne Richard P.			=	o. <u>47,72</u>	
Box 1450, Alexandria, V	nons for reducing this bi Virginia 22313-1450. D 313-1450.	O NOT SEND FEES OR	COMPLETED FORMS T	O THIS ADDRESS	ne public which is to file (a ninutes to complete, includ mments on the amount of Trademark Office, U.S. De SEND TO: Commissione displays a valid OMB contr	nd by the USPTO to process) ing gathering, preparing, and time you require to complete partment of Commerce, P.O. r for Patents, P.O. Box 1450, ol number.